STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Custer County Chronicle		2. DATE 09-28-2011
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE $ 40/$50
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 522 Mt Rushmore Rd PO Box 551 Custer SD 57730		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) PO Box 551 Custer SD 57730		
6. FULL NAME OF PUBLISHER:		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Southern Hills Publishing Inc	PO Box 551 Custer SD 57730

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

None

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	2000	2000
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	800	786
2. Mail Subscription (Paid and or requested)	1100	1064
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1900	1850
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	28	28
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1928	1878
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	50	50
2. Return from News Agents	22	72
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	2000	2000

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Charles R. Najacht — (Signature)

Publisher — (Title)

State of South Dakota)
§
County of Custer)

Sworn to before me this 28 day of Sept, 2011

Norma Najacht — Notary Public

My commission expires: May 5, 2012

(Seal)

NORMA NAJACHT
NOTARY PUBLIC
SOUTH DAKOTA
SEAL

Form: SOS REC 051 7/2004

50% Charles W. Najacht PO Box 551 Custer SD 57730

50% Norma G. Najacht PO Box 551 Custer SD 57730